



Return original and KEEP A COPY FOR YOUR RECORDS: DO NOT FAX, ORIGINAL IS REQUIRED

### MONTHLY CHECKING ACCOUNT DRAFT AGREEMENT

For your convenience, you may have your monthly rent charges automatically paid from your checking account. FASS Management Real Estate Services (d/b/a FASS Real Estate Services) does not charge you for this service; however, your bank or credit card agency may charge you a fee for the transaction.

- Complete and sign the AutoPay Authorization Agreement form below, using blue or black ink
- Write "void" on one of your checks
- Return the original completed AutoPay Authorization Agreement form and a "voided" check to FASS Real Estate Services in person, to the mailing address below or with your next rent payment; deposit slips are **not** acceptable, faxes are **not** acceptable

#### AUTOPAY QUESTIONS and ANSWERS

**Q: What type of account can I use to participate?**

**A:** AutoPay can withdraw funds automatically from any personal or business checking account as listed above.

**Q: When will the funds be withdrawn from my account?**

**A:** 7 days from the *created date* on your rent invoice. The created date is located in the upper left corner of your rent invoice. This gives you time to review your bill prior to the amount being deducted from your checking account.

**Q: How do I enroll?**

**A:** It's easy! Just complete the AUTOPAY AUTHORIZATION AGREEMENT form below and return to us with your rent payment.

**Q: How will I know when AutoPay will make my payments?**

**A:** Continue to pay your rent normally until you see the message on your statement "PAID BY DRAFT" and then do not remit a payment for that statement. You are check free! Please ensure that your account is current, with no credit balance, before you apply.

**Q: Can I pay multiple rent payments in advance through AutoPay?**

**A:** YES. Simply include the additional months you want to pay from the same checking account on your AutoPay Authorization Agreement form.

**Q: What if a payment is rejected?**

**A:** Payments may be rejected by your financial institution for any reason. We reserve the right to charge a minimum \$25.00 fee for the first item and \$35.00 fee on each subsequent item on your next statement and may also discontinue your participation in the AutoPay program if your payment is rejected more than once in a 12-month period. Your financial institution may also charge fees for rejected payments.

**Q: How do I change or cancel participation in this program or what if my banking information changes?**

**A:** Simply visit our website at [www.FASS-RES.com](http://www.FASS-RES.com) to print the cancellation form or contact us for an AutoPay Authorization Agreement form. Check the CHANGES or CANCELLATION box below, complete the rest of the form, sign and return the agreement to us in person, mailing address below or with your next rent payment. All changes or cancellations **MUST** be done in writing.

**Q: What if I have questions on my statement or want more information?**

**A:** Call us at 866/ 861-4761 and speak with the Office Manager, Monday – Friday between the hours of 9:00am– 5:00 pm.

CUT HERE. Please retain upper portion for your records.

**AUTOPAY AUTHORIZATION AGREEMENT FORM** – Please print clearly, using blue or black ink

CHANGES CANCELLATION

Lease Agreement Holder(s) Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ Daytime phone: \_\_\_\_\_

I authorize FASS Real Estate Services to: (check (✓) one)

deduct my monthly rent charges from my checking account listed on the enclosed "voided" check. Application cannot be processed without a "voided" check.

Effective date: \_\_\_\_\_ Amount: \_\_\_\_\_

cancel deduction of my monthly rent charges from my checking account

Effective date: \_\_\_\_\_

#### \*\*CHECKING ACCOUNT DRAFTS

Return this form with a blank check with the word "VOID" written on the check.

Deposit slips are **not** acceptable. Please allow ten (10) business days for processing. This authorization shall remain in full force and effect until FASS Real Estate Services has received written notification from me of its change or termination. If necessary, I authorize adjustment credit and/or debit entries in case of errors. I understand that both FASS Real Estate Services and my financial institution reserve the right to terminate this authorization and my participation therein.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Name on "voided" check must match name of the lease holder)